## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450



or <u>Fax</u>

(703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where
appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as
indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for
maintenance fee notifications.

	current correspondence		with any corrections or use Block 1)	Note: A certificate of	of mailing can only be used for	or domestic mailings of the
•	7:	590 03/04/2004		Fee(s) Transmittal, T	his certificate cannot be used nal paper, such as an assignmente of mailing or transmission.	for any other accompanyin
.· <b>7</b> (*)	Siemens Corpora Attn: Elsa Keller, I Intellectual Propera 186-Wood Avenue	Legal Administrator ty Department		I hereby certify that States Postal Service	ertificate of Mailing or Trans this Fee(s) Transmittal is bein with sufficient postage for fir ail Stop ISSUE FEE address PTO, on the date indicated bel	g deposited with the United st class mail in an envelop
	Iselin, NJ 08830	bouti		Raguel (	West	(Depositor's name)
					M	(Signature)
				Ma	y 17, 2004	(Date)
Γ	APPLICATION NO.	FILING DATE	FIRST NAM	IED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
_	10/053,369	11/02/2001	Todd H	I. Steinberg	2001P19662US	2875
T	ITLE OF INVENTION: S	YSTEM AND METHOD FO	OR MEASURING BEAM QU	IALITY AND DOSIMETRY US	SING ELECTRONIC PORTA	L IMAGING
٢	APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
_	nonprovisional	NO	\$1330	\$300	\$1630	06/04/2004
٢	EXAM	AINER	ART UNIT	CLASS-SUBCLASS	7	
٦	PATEL, H	ARSHAD R	2855	378-065000	<b>-</b>	
3	ASSIGNEE NAME AND PLEASE NOTE: Unless been previously submitte (A) NAME OF ASSIGN SIEMENS MED	an assignee is identified be ed to the USPTO or is being	E PRINTED ON THE PATE low, no assignee data will app submitted under separate cove (B) RESIDER ONS USA, INC.	NT (print or type) pear on the patent. Inclusion of r. Completion of this form is NONCE: (CITY and STATE OR CO	assignee data is only appropri	ate when an assignment ha
_	a. The following fee(s) are	enclosed:	4b. Payment	of Fee(s):	corporation or other private g	roup entity
-	a. The following fee(s) are is Issue Fee	enclosed:	4b. Payment □ A check	of Fee(s): k in the amount of the fee(s) is e	nclosed.	roup entity
_	a. The following fee(s) are  So Issue Fee  Publication Fee	enclosed:	4b. Payment ☐ A check ☐ Paymer ☐ The Di	of Fee(s):  k in the amount of the fee(s) is ent by credit card. Form PTO-203 rector is hereby authorized by	nclosed. 8 is attached. charge the required fee(s), or	credit any overpayment, t
4	a. The following fee(s) are  Issue Fee  Publication Fee  Advance Order - # of	Copies	4b. Payment  A check  Paymer  The Di  Deposit A	of Fee(s):  k in the amount of the fee(s) is ent by credit card. Form PTO-203 irector is hereby authorized by account Number 19-217	nclosed.  8 is attached.  charge the required fee(s), or (enclose an extra or	credit any overpayment, topy of this form).
4	a. The following fee(s) are  Issue Fee  Publication Fee  Advance Order - # of	Copies	4b. Payment  A check  Paymer  The Di  Deposit A	of Fee(s):  k in the amount of the fee(s) is ent by credit card. Form PTO-203 rector is hereby authorized by	nclosed.  8 is attached.  charge the required fee(s), or (enclose an extra or	credit any overpayment, topy of this form).